Sl. No.	Diseases	2004-05		2005-06		2006-07	
		Cases	Deaths	Cases	Deaths	Cases	Deaths
1	Viral Hepatitis	203939	1122	181621	718	144109	622
2	ADD	9575112	2855	10978459	2147	8291807	2669
3	Cholera	4728	9	3155	6	1939	3
4	Enteric Fever	658301	805	695114	419	610012	587

International commission for disease eradication (ICCDE) certified the declaration of eradication of Guinea Worm Diseases from the country in 2000. However, surveillance is carried out for the disease from time to time as required till its eradication from the world. No cases of Yaws incidence have been reported since 2003. Consequently, in September 2006, the disease was declared as eliminated from the country by the Hon'ble minister for H & FW. There is no eradication programme for water borne diseases. However funds spent for YEP & GWEP during the last three years are as follows:

(*Rupees in Lakhs*)

	2004-05	2005-06	2006-07
YEP	52.86	93.6	86.34
GWEP	8.12	7.25	4.56

The programmes have been regularly assessed by the Task Forces constituted under the chairmanship of DGHS.

Marketing of Letrozole

876. SHRI B.K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Drugs Controller General of India (DCGI) has issued authorization to any pharmaceutical company to market Letrozole in India for treatment of infertility;

(b) whether the Canadian Health Authority has ruled that Letrozole should not be used for infertility treatment and whether US and UK have also banned marketing of Letrozole for treatment of infertility;

(c) whether the Drugs Controller General of India had subjected the drug to clinical trials to establish safety and to determine side effects, dose and regimen before issuing authorization; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILLY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Yes, Sir. Based on expert's opinion, clinical trial data generated in the country and supportive published data, the Office of DCG(I) has granted permission to market letrozole for its use in induction of ovulation in anovulatory infertility.

(b) No, Sir. As per the information available, Canadian Health Authority has not ruled that letrozole should not be used for treatment of infertility. US & UK have not yet approved letrozole for treatment of infertility. Hence, question of banning letrozole for infertility does not arise.

(c) and (d) Yes, Sir. Before grant of marketing authorization, clinical trial was conducted with letrozole in induction of ovulation in anovulatory infertility.

Polio cases

877. SHRI VARINDER SINGH BAJWA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of polio cases reported in the country during 2007 and so far during 2008 till 1st March, 2008, State-wise;

(b) the reasons for such cases inspite of massive anti-polio campaign going on in the country for years;

(c) whether the genuineness and efficacy of the vaccine used has been verified; and

(d) if so, the findings thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE Minister of HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Number of polio cases reported in the country during 2007 and during 2008 till 1st March 2008 is as under:

Year	Number of polio case
2007	866 (P1-80, P3-783, P1+P3-3)
2008	106 (P1-1, P3-105)

State wise details of case reported in 2007 and till 1st march 2008 are given in the Statement, (*See* below).

(b) There was an increase in Type 3 polio virus cases which spread from western Uttar Pradesh to the rest of the State and re-infected Bihar. As per the immunization strategy recommended by India Expert Advisory Group on Polio (IEAG) focus was to be on Type 1 polio virus elimination by using monovalent type 1 polio vaccine since April, 2005 and keeping Type 3 polio in check, because P1 circulates more widely, has been responsible for international spread and has the propensity to cause large outbreaks.

During 2007 there has been a sharp reduction in polio type 1 cases in the country. Polio type 1 cases have not been reported from the endemic districts of Western Uttar Pradesh for more than one year. Polio type 1 circulation in Bihar is also restricted to a small proportion of blocks.

(c) and (d) All vaccines including Oral Polio Vaccine are tested by central Drugs Laboratory-Kasauli before their release to the states.

The Polio Vaccine for Pulse Polio Programme are procured by UNICEF from WHO pre-qualified Manufacture. Pre-release testing for potency is done on each batch of vaccine.

Samples from each Batch are tested in CRI Kasauli and on receipt of the quality certificate, the vaccines are dispatch to the field for use.

Vaccine Vial Monitor (VVM) is also affixed on the vials, which help the field functionaries to use the potent vaccines only.